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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known							
			Application Number 09		09/890,425-Conf. #1812					
FEE TRANSMITTAL			Filing Date Fe		February 19, 2002					
			First Named Inventor H		Harold G. BROWN					
For FY 2008			Examiner Name T.		T. E. Underdahl					
X Applicant claims small entity status. See 37 CFR 1.27			Art Unit 16		1651					
TOTAL AMOUNT OF PAYMENT	(\$) 210.00	100	Attorney Docket	No. 2	059-0103P					
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP										
For the above-identified de	posit account, the Dire	ctor is	hereby authorize	ed to: (check	k all that apply)					
Charge fee(s) indicat	ed below		Charge	e fee(s) indi	cated below, ex	cept for th	e filing fee			
Charge any additional fee(s) or underpayments of x Credit any overpayments										
FEE CALCULATION										
1. BASIC FILING, SEARCH, AND	EXAMINATION FEES									
'	ILING FEES	SEA	RCH FEES	EXAMIN	ATION FEES					
Application Type Fee	Small Entity (\$) Fee (\$) F	ee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)			
Utility 31		510	255	210	105					
Design 21	105	100	50	130	65					
Plant 21	105	310	155	160	80					
Reissue 31	155	510	255	620	310					
Provisional 21	105	0	0	0	0					
2. EXCESS CLAIM FEES					•		Small Entity			
Fee Description						Fee (\$)	Fee (\$)			
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)						50 210	25 105			
Multiple dependent claims	ridding Keissucs)	* 1					185			
Total Claims Extra Claims										
91 ₁₀₃ = 0	x 25.00 =		00							
HP = highest number of total claims paid	· · · · · · · · · · · · · · · · · · ·						4			
Indep. Claims Extra Claims	Fee (\$)	Fee P	aid (\$)				_			
2018=2	× 105.00 =		0.00							
HP = highest number of independent clair	ns paid for, if greater than 3	•								
3. APPLICATION SIZE FEE										
If the specification and drawings listings under 37 CFR 1.52(e))			
sheets or fraction thereof. See					,,					
Total Sheets Extra She	ets <u>Number of</u>	each a	dditional 50 or frac	tion thereof	Fee (\$)	Fee F	Paid (\$)			
	/50 =		(round up to a who	ole number) >	·	<u> </u>				
							Paid (\$)			
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge):										
SUBMITTED BY	1/1000		Double No.							
Signature	Lyen	2	Registration No. (Attorney/Agent)	32,181	Telephone	(703) 205				
Name (Print/Type) Marc S. Weiner			-		Date	APR 2	5 2008			

AMENDMENT TRANSMITTAL LETTER						Docket No. 2059-0103P					
Application No. 09/890,425-Conf. #1812		Filing I	Date 19, 2002	Examiner T. E. Underda	ahl	Art Unit 1651					
	Applicant(s): Harold G. BROWN et al.										
Invention: A PHARMACEUTICAL COMPOSITION OF COMPLEX CARBOHYDRATES AND ESSENTIAL OILS AND METHODS OF USING THE SAME											
MS Amendment Commissioner for I P.O. Box 1450 Alexandria, VA 223 Transmitted here	313-1450	ndment in the	above-identii	fied application.							
The fee has beer											
			S AS AMEN	DED							
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate							
Total Claims	91	- 103 =	0	x 25.00		0.00					
Independent Claims	20	- 18 =	2	x 105.00		210.00					
Other fee (please specify): TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: Large Entity No additional fee is required for this amendment. X Please charge Deposit Account No. 02-2448 in the amount of \$ 210.00											
A check in the amount of \$ is enclosed. Payment by credit card. Form PTO-2038 is attached. X The Director is hereby authorized to charge and credit Deposit Account No											
Falls Church, V (703) 205-8000		0747									